

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000002556

FILED  
Mar 22, 2002 8:00 AM  
Secretary of State

Entity Name: UNITED SPACE ALLIANCE FOUNDATION, INC.

**Current Principal Place of Business:**

8550 ASTRONAUT BOULEVARD  
CAPE CANAVERAL, FL 32920

**New Principal Place of Business:**

**Current Mailing Address:**

8550 ASTRONAUT BOULEVARD  
CAPE CANAVERAL, FL 32920

**New Mailing Address:**

FEI Number: 76-0668924      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HAMMOND, JOSEPH W  
Address: 1150 GEMINI, MC: USH-300E  
City-St-Zip: HOUSTON, TX 77058

Title: TD ( ) Delete  
Name: CAPEL, WILLIAM R  
Address: 1150 GEMINI, MC: USH-200E  
City-St-Zip: HOUSTON, TX 77058

Title: S ( ) Delete  
Name: GROVES, EILEEN A  
Address: 1150 GEMINI AVENUE  
City-St-Zip: HOUSTON, TX 77058

Title: D ( ) Delete  
Name: DIEMOZ, DENNIS K  
Address: 1150 GEMINI, MC: USH-100E  
City-St-Zip: HOUSTON, TX 77058

Title: D ( ) Delete  
Name: TURNER, RUSSELL D  
Address: 1150 GEMINI, MC: USH-100A  
City-St-Zip: HOUSTON, TX 77058

Title: D ( ) Delete  
Name: VERMILYEA, CLYDE L  
Address: 600 GEMINI, MC: USH-400A  
City-St-Zip: HOUSTON, TX 77058

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DENNIS K. DIEMOZ

D

03/22/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date